Annual Address

BY THE PRESIDENT

FORDYCE BARKER, M.D.

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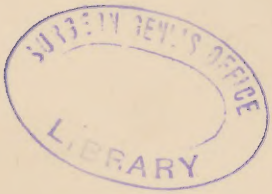

ANNUAL ADDRESS.

BY FORDYCE BARKER, M. D., PRESIDENT,

New York.

In this memorable year of our nationality, we have organized a society having for its object, as expressed in our Constitution, the promotion of knowledge in all that relates to the Diseases of Women and to Obstetrics.

We have now met for the first time, to begin our work; and may we not hope that at the annual gathering of each coming year, this work may be done so well that when another hundred years have passed, the centennial anniversary of this Society may be well worthy of commemoration by those who are to succeed us? May we not confidently anticipate that this Society will exert a marked influence in stimulating inquiry, investigation, and recorded observation, and thus be an important agent in contributing to the progress of science and our national reputation in this branch of our profession? May we not secure for it such a character, by zealous, honest, able work, as that all who aim for reputation in the department of Obstetrics and Gynecology, will seek to obtain membership, as giving the seal and stamp of eminence? Can we not now, in the beginning of its career, give it such a direction, impress, and tone, that each annual volume of our Transactions shall contain papers of value so great that all intelligent men in the profession, who strive to keep abreast with the progress of science will desire to secure a copy, and that at the centennial anniversary of this Society a hundred volumes of its Transactions will fairly represent our national contributions to the progress of science and art in Obstetrics and Gynecology?

If the future of this Society prove to be as great a success as I am sure we all hope it may, then he who sug-

gested its formation, and those who have assisted in its organization, have done a great work and will be entitled to high honor therefor. I may say this frankly, because I can lay no claim to the honor of either suggesting or planning its organization.

I cannot adequately express my appreciation of the undeserved honor which I have received at your hands, an honor which I esteem more highly than any that has before been conferred upon me. Fully conscious as I am that there are others who have a much better claim to the position of President from what they have done by their contributions in literature and science, or from the important improvements in practice which they have originated, I accept the distinction as an expression of personal kindness. Failing in words to appropriately acknowledge this kindness, I can only show my gratitude by a zealous, honest effort to perform the duties of the office so as to secure for our meetings the most efficient work. I hope for a measure of success, because I rely with confidence upon your kind aid and hearty coöperation. As you all know, the conception of this Society originated with a gentleman who deemed this an appropriate year to combine in a national organization certain representative men who had become prominent by their writings and their labors in Obstetrics and Gynecology. By personal consultation and correspondence with a considerable number, as large as the limited time would permit, it was found that the scheme was regarded with great favor. A meeting was called for organization, which was attended by gentlemen from several of the largest cities of the Union, and which was endorsed and approved by correspondence which represented every part of the country. In the organization of the Society, it was deemed wise to have the number of members limited, so that active working men only should be enrolled and membership esteemed an honor ; and as the time had been too short for consultation and approval of all whose position and reputation would secure membership, only two thirds of the full number admissible were elected. It was from no invidious discrimination that some, who are entitled

by what they have done, either in Obstetrics or Gynecology, to an original membership equally with those who are included, have been left out, but it was because, either from lack of personal acquaintance or from their topographical position, there was no opportunity to ascertain their wishes and their views in regard to the scheme. It is confidently believed that these will seize an early opportunity to become members, by presenting such papers as will do honor to themselves and to the Society. The influence of a few such men, whose reputation is already established, will do much to stimulate others, who have a growing reputation but still a name to make, to work in the same direction and adopt the same means for gaining membership. The decision of the Council to publish in each volume of the Transactions a complete bibliography of everything that appears pertaining to Obstetrics and Gynecology during the current year, not only in English but in foreign literature, will undoubtedly secure to papers in these Transactions a larger class of special readers than could be obtained through any other medium of publication.

The status of this Society in the scientific world, will be determined by the character and value of the papers published in its Transactions, and by the tone and ability of its discussions. I cannot permit myself to doubt that it will soon attain such a position that the title, "Fellow of the American Gynecological Society" affixed to the name of the writer of a paper on any subject which relates to Obstetrics and Gynecology, will be so strong a presumptive evidence that such a paper must have value, as to secure perusal from all interested in the topics discussed.

I hope that it will not be considered as offensively presumptuous on my part, if I venture to offer a few suggestions in relation to the character of the papers which are to be laid before the Society and also in regard to the discussions at its Annual Meetings. The papers which the Society will receive must necesarily be of two classes.

(1.) Those which would be useful and interesting to be read and discussed at our meetings.

All subjects relative to questions in pathology and practice which have not yet been settled by the general sentiment of the profession will most appropriately belong to this class. On many questions it is to be presumed that members have given much thought and study and can bring to bear on their discussion the results of mature inquiry and a clear and forcible statement of the reasons which have lead to positive convictions and well defined rules of practice. In some papers, the novelty of opinions advocated and the original methods of practice proposed, whether medical or surgical, may be so exclusively a matter of individual experience, that all discussion at first must necessarily be limited to inquiries and *a priori* objections, founded on anatomical, physiological, or pathological grounds. Papers of this class should be the subject of a most searching and thorough examination; for they may be either mischievous, and their effect for evil must be effectually exposed, or they may possess positive value which should lead to prompt acceptance and adoption. No doubt many such will be offered to us, which will require the continued discussion and the accumulated observation of years, before the question is absolutely settled. There are many such questions still open in practical Obstetrics and a larger number in subjects connected with Gynecology. As opinions and rules of practice based on the experience of a thousand observations often reverse the opinions and rules of practice based on the experience of hundreds and tens, so many questions, which we now deem settled, will, as observations which are thoroughly to be trusted accumulate in the larger proportions of thousands and millions, have to be reopened and new results both as regards doctrine and practice will be reached.

One of the useful results which flow from the formation of societies for the advance of science, is that it leads to original and independent research and has a tendency to overcome blind reverence for authority. Thus it may happen, and it often has happened in science, that one stands alone One who has most thoroughly studied a subject in all its aspects, and who has convinced himself, by what he believes

to be incontrovertible facts and careful reasoning, that the opinions he holds are sound, may find himself like the juryman associated with eleven obstinate men. But truth will eventually triumph; and the personal consideration whether the one or the eleven be obstinate, is a matter of no importance. If writers on scientific subjects only appreciated how indifferent the world is to personal controversies, with what aversion and contempt it regards abuse, with or without argument, much of the acrimony and bitterness, which unfortunately often mar the discussion of questions of science, would disappear. In general, the violence of the personal abuse is in inverse ratio to the importance of the subject. As for example, I have seen nothing which surpasses the ferocious temper and violent denunciations of philological disputants, where the whole subject of controversy is only what Hamlet avowed that he was reading, "words, words."

(2.) A second class of papers is of such a character that no one could listen to the reading of them with interest or advantage. The time of the Society could be better occupied than by the hearing of papers of this kind, because they require careful perusal and private study. There is a large class of topics, which it should be the province of this Society to examine, that cannot be properly treated in a forensic discussion. All practical questions, which involve great statistical research, analysis, and deduction, and all papers based on original physiological, anatomical, and pathological studies, must come under this category.

As illustrating what I mean, I may refer to a paper by one of our Fellows, published many years ago, on Rupture of the Uterus, which every writer on the subject at the present day is compelled to allude to and quote from; to a paper which has recently been published by another of our Fellows on the Internal Structure of the Uterus; and to another essay by a gentleman in Cincinnati, on Erysipelas and Childbed Fever, published a year ago.

Now, papers of this class would most appropriately appear in our Transactions; they would help to give the Society a high scientific position, and to cause a demand for our

Transactions by reading, thinking men in the profession outside of our Society, but they are not such papers as could be profitably read at our meetings.

Let it then be understood at the beginning, that the vote of the Council to publish a paper, but not to have it read at our Annual Meeting, is not an expression of opinion as to its merit, for undoubtedly such will be the action of the Council, in regard to some of our best papers.

We have a right to expect papers of value from candidates for membership. I beg to suggest that those which possess such merit as to secure from the Council a nomination for election should be published in our Transactions, but that the names of those who are unsuccessful be kept secret, and that the authors be informed that their papers can be returned. There may be every year more or less of such papers well worthy of publication in Medical Journals, but which fail to reach that standard of excellence which should secure membership. In the Academy of Medicine of Paris, and some other societies, where election to membership is a test of high attainments, candidates frequently fail to secure an election, two or three times successively, who afterwards attain the position sought for, and in some instances they have been the members who have reflected upon the society its highest distinction. Without insisting that our selection of members should depend solely or even chiefly on the literary quality of the candidate, we surely may demand that one who has acquired such a reputation as to make him a desirable member of the Society should furnish such a written justification of that reputation as would merit a place in our Transactions.

As regards the discussions at our meetings, I may be permitted to say that they should be the expression of careful study, deliberate judgment, and mature experience. The time of the Society is too valuable to be taken up by listening to the crude, impulsive, badly-arranged outbursts of the moment; and no thoughtful man will run the risk of jeopardizing such a reputation as a Fellowship of this Society should imply, by speaking on a subject, unless he has al-

ready formed distinct opinions, and can clearly state the mental processes by which he has arrived at these opinions. I am far from intending to suggest that our discussions should be written out and read. This would destroy all rhetorical brilliancy in debate, all liveliness of repartee, and indeed the life of our meetings. The keen analysis which finely dissects the fallacy of an argument, the good humored sarcasm which makes clear and transparent an absurd proposition, if spontaneous and impersonal, will be enjoyed by all, even by the victim; but the same weapons of debate, if written in cold blood and deliberately read, often sound brutal, and are offensive to good taste and good feeling. So let us by all means encourage and sustain oral discussions and make them as lively and brilliant as possible, but never personal! In scientific societies, for some reason which philosophy has not explained, it seems especially necessary to guard against a sensitiveness which assumes that a criticism is intended to be personal, when the attack is directed only against the statements, reasoning, and doctrines of the person. It, of course, is the duty of the chair to guard against personal attacks, and if any one should feel that he is attacked, he should deem it unnecessary to defend himself, for his most effective defense will be found in the contempt and aversion felt toward the aggressor. It is to be anticipated, that papers will be read on controverted pathological doctrines, obscure points of diagnosis, and disputed questions of practice; and it will be mainly papers of this class which will give rise to oral discussions. We may expect that those who have studied in the same direction will be able to add other facts, either confirming or refuting the doctrines advocated. No one has a right to complain if ignorance of the science of the past be exposed, if false assumption be made manifest, or if keen criticism be brought into play to point out errors in fact, errors in logic, or errors in practice.

It may be profitable and interesting rapidly and briefly to contrast the stand-point in science and in practice from which our Society starts, with that of the period which we now commemorate as our National Centenary.

I think it may be truthfully asserted, that in Obstetrics and Gynecology the progress in science, and consequently the improvements in practice, have been greater during the past one hundred years than the whole advance made during the previous ten centuries. Much also of the learning of the past, which had been lost or buried in oblivion, has been brought to light, and has given an impetus to new investigations and new discoveries. The literature of one hundred years ago was so extremely limited, that it is not probable that a single private library in Europe contained thirty volumes devoted to subjects relating to Obstetrics and Gynecology, or that any physician in this country possessed one quarter of this number of volumes. The works on Midwifery by English authors, published during the preceding one hundred years, and which I mention in the order of their date of publication, were by Giffard, Chapman, Burton, Smellie, Pugh, Cooper, Lake, Johnson; "The Anatomy of the Gravid Uterus," by William Hunter, published in 1774; Hamilton's "Elements of the Practice of Midwifery," White on "The Management of Pregnant and Lying-in Women," and Rigby's Essay on "Uterine Hemorrhage," published in 1775. The books previously published by English authors were obsolete, and indeed were of little value. With the exception of the works by Giffard, Smellie, Hamilton, White, Rigby, and William Hunter, those I have just mentioned represent the knowledge of the day, chiefly acquired from Continental authors, rather than original contributions to science. The works of Guillemeau, Puzos, Mauriceau, Peu, Dionis, Astruc, La Motte, Levret, and Daventer had appeared in English translations, and Roederer's "Elementa Artis Obstetriciæ" was undoubtedly well known to some. German literature was not then cultivated in England, and we may suppose it to have been wholly unknown to any members of the profession in this country, and Roederer, who wrote in Latin, is probably the only German writer then known to obstetricians. The teaching of Fries at Strassburg, of Crantz at Vienna, of Meckel at Berlin and greater than all, that of Georg Wilhelm Stein,

was limited in its influence, during the lifetime of these men, to those countries where the German language was spoken. At the present day so many, both in England and in this country, are familiar with German literature, that it is no longer safe to appropriate as original what has been previously published by some German author.

In 1776, there can hardly be said to have been any literature on the Diseases of Women, for Gynecology as a science had then no existence. Astruc on "Diseases of Women," which had been translated into English, was the only work exclusively devoted to this subject. There was much incidentally alluded to in works on Surgery and the Practice of Medicine, and many important papers in the Transactions of Scientific Societies, particularly in France, but this knowledge had not been culled out and brought together by a class of industrious and useful workers who are now so numerous. Hence much of the knowledge of Gynecology, which it is evident from the writings of Aetius and Paulus Ægineta, belonged to the profession down to the seventh century, finds no place in the Medical literature of the eighteenth.

The speculum and the uterine probe, by means of which, chiefly, this department of the profession has been raised to the rank of a special science, had been known and probably were used to a limited extent by a few, as they are mentioned by several writers of the seventeenth century; but no allusion to either of these instruments can be found by any writer in the English language, and it is not probable that a single man in England or America ever made use of either of them until within the past half century.

If we now compare the obstetrical science of a hundred years ago with that of to-day, the contrast will be still more striking. The work of William Hunter on "The Anatomy of the Gravid Uterus," published in 1774, was a contribution to science, exceeding in value and importance any before made to Obstetrics, and it will stand for all time. He laid a solid foundation on which to build up Obstetrics as a science, and his name will be enrolled among the Band

of Immortals. More recent investigations in the same direction have demonstrated the distinction in anatomical structure and arrangement, in physiological functions, and in pathological changes between the cervix and the body of the uterus. The facts that the wonderful developments which take place in the structure of the uterus during gestation for the nutrition and retention of the fecundated ovum, pertain exclusively to the body of the uterus, that it is the lining membrane of this part of the organ alone which undergoes such remarkable changes during menstruation, gestation, and the puerperal period, and that forms the decidua and participates in the development of the placenta, and that the changes which take place in the cervix during gestation are solely those which prepare this portion of the uterus for the function of parturition, are the great additions to our knowledge of the anatomy of the uterus of the past fifty years. As a natural deduction from these new truths in the anatomy and physiology of the organ, it has been learned that the pathology of the cervix differs from that of the body in its proclivity to disease and its tolerance of traumatic injuries, the gravity of the influence of disease or traumatism on the general health, and the tendency to restoration either spontaneously or by the resources of art.

Our predecessors a hundred years ago had only a crude general knowledge of the anatomy and functions of the ovaries. The discovery of the independent existence of the ovule by Von Baer was the beginning of a series which have now unfolded the intimate structure and function of these organs. The processes of ovulation and the formation and significance of the corpus luteum are now understood, while much obscurity in regard to generation has been cleared up.

How difficult and uncertain must have been the diagnosis of pregnancy in obscure cases — which are by no means rare — when there was no knowledge of the physiological changes which pregnancy effects in the cervix uteri, when auscultation of the sounds of the fetal heart and the uterine souffle was unknown, when *ballottement* and the intermittent contractions of the gravid uterus had never been pointed

out, all of which are now presumed to be known by every one who asks the confidence of the public as an obstetric practitioner.

Of the diseases of pregnancy, chloro-anemia and albuminuria — the two most important of all — had never been recognized or described. It may also be added, that little was known a century ago, in regard to the pathology and appropriate treatment of the serious nervous affections, chorea, eclampsia, and the various paralyses.

The pathology of the decidua and ovum had then received no attention. Hypertrophy of the decidua, vesicular degeneration of the chorion, fatty degeneration of the placenta, and the blood transformations in the placenta, which until recently were believed to be due to inflammation in this organ, find no place in any obstetric work published forty years ago. As the pathology of the ovum and the uterine system has been developed, so there has been a corresponding advance in our knowledge of the causes, prevention, and treatment of abortion and its consequences.

On the other hand, any physician, a century ago, who would have ventured to produce abortion on account of prolonged vomiting and inability to retain nutrition, would undoubtedly have been regarded both by the profession and the public as reckless, unscrupulous, and unprincipled. The moral right under any circumstances to induce premature labor, had been earnestly discussed prior to the period that we are now considering. But it is only within a very recent date, that the ethical sense of the profession has settled the question that it becomes the duty of obstetricians to resort to this procedure when a careful analysis of all the conditions of the case and sound reasoning have decided that it is a necessary measure to give a chance for saving the life of the child without adding materially to the risk of the mother, and in a still larger number of instances, when it is imperative in order to save the mother, disregarding the probabilities in regard to the child alone.

If we compare the knowledge of Mauriceau, of La Motte, of Giffard, of Smellie, as to the mechanism of parturition

with that of all well-informed obstetricians of the present day, we must come to the conclusion that the successful results obtained by the greatest accoucheurs were the triumphs of individual genius, rather than the scientific application of established laws. The presenting part was sought, but the relations of the presenting part to the different points of the superior strait were not recognized or studied. The different steps of flexion, descent, rotation, extension, and external rotation had never been analyzed or described. The successive changes in the relations of the diameters of the fetus to the diameters of the pelvis in normal labors being unknown, all attempts to aid a difficult labor by the resources of art could have been governed by no scientific principles and must have been experimental. From the philosophic study of the mechanism of delivery, has resulted an approximation to definite rules of practice in every variety of presentation and position, which, although far from the perfection of exact science, is in remarkable contrast with the blind groping of our predecessors. What a flood of light has been thrown by the numerous observations of many minds, on the various causes of dystocia and the resources of art which may overcome it! In no one point has the advance been more striking, more positive and more important, than in respect to the use of the forceps. It may be confidently asserted that no obstetrician, of acknowledged position, would "confess with regret, that towards the end of thirty years' practice, I found much less occasion for the use of instruments than I had in the beginning" or would "conclude that the person, who, in proportion to the extent of his practice, meets with the most frequent occasion for the use of the instruments knows least of the powers of nature," as did Bard, our first American author on Obstetrics, and he undoubtedly represented the accepted opinions of the profession, with but few exceptions, until within the last decade. It was universally held that the use of the forceps was attended with great risk to the mother and child, and therefore that they never were justifiable unless all hope of natural delivery was at an end and symptoms of exhaustion began to appear. But at

the present day, the danger from the use of the forceps, when the head is in the pelvic cavity or pressing on the perineum, is regarded as so trivial, as compared with the danger to both mother and child from delay, that the terse enunciation of the law, by Dr. George Johnston, recently the distinguished Master of the Rotunda Hospital, Dublin, that, "Our established rule is that so long as nature is able to effect its purpose without prejudice to the constitution of the patient, danger to the soft parts, or the life of the child, we are in duty bound to allow the labor to proceed; but as soon as we find the natural efforts are beginning to fail, and after having tried the milder means for relaxing the parts or stimulating the uterus to increased action, and the desired effects not being produced, we consider we are in duty bound to adopt still prompter measures, and by our timely assistance relieve the sufferer from her distress and her offspring from an imminent death," must be accepted as a settled tenet in Obstetrics. The glamour of danger which obscured perception as to when the use of the forceps is indicated undoubtedly originated in confounding the difficulty and skill demanded in their use, in the comparatively few cases where they are required when the head is at or above the superior strait, as being equally true in the many cases where we now use the instruments when the head is in the cavity.

A study of the history of the use and abuse of ergot, might serve "to point a moral and adorn a tale" as illustrating how settled convictions and practice change with the progress of science and the accumulation of experience. For a series of years, it was often administered to accellerate parturition, until slowly it became known that its use sometimes resulted disastrously to the mother and was always attended with considerable danger to the child, and it was found that we had safer means for stimulating the inert or exhausted uterus; so that at the present day, I believe it to be rarely given for this purpose, while we still find it an invaluable agent, when delivery has been accomplished, in securing the woman against the danger of post-partum hemorrhage, and in notably diminishing the liability to after-pains.

The most wonderful of all the discoveries that has been made in obstetric practice is the use of Anesthetics, which, when properly administered, have no injurious effect upon either mother or child, but by which, the dread and horror that haunts many a poor woman for weeks before labor is in a great measure changed to a feeling of safety and immunity from the greatest of all suffering that human nature is called upon to endure; which calms the extreme agitation and mental excitement that labor often produces in nervous women; by which the physical pains of parturition have been greatly relieved or abolished, and the nervous shock and exhaustion of delivery in many cases averted; which accellerates the termination when the progress of labor is retarded from pain occasioned by previous disease, and where the irregular and partial contractions cause intense and almost constant pain, but have no effect to advance the labor; and in other cases, by overcoming spasmodic contraction of the cervix and tetanic rigidity of the perineum, while in the class of cases where the anesthetic retards labor, the relief from pain, and the protection from exhaustion, more than compensate for the delay; and which has contributed greatly to reduce the mortality from puerperal convulsions; and has rendered painless and easy of execution many obstetric operations, and made others possible and safe, that would be dangerous and fearfully agonizing without this agent.

Who at the present day, could ever consent to assume the responsibility of a midwifery case, and watch for hours by the bedside of a woman suffering agony beyond that of most surgical operations, if the new science of the present century were blotted out, and all the consequent improvements in practice forgotten.

Conceive the helplessness of one ignorant in a great measure of the anatomy and physiology of the organs involved in the phenomena that he is to watch and assist to a safe termination! Knowing nothing of the mechanism by which the process is normally accomplished and but little of our present resources for overcoming dystocia, looking upon

the forceps as an instrument of terror, only to be resorted to when it has been demonstrated that delivery can never be otherwise accomplished, powerless to relieve agony by an anesthetic which still permits the essential phenomena to go safely on, having but an imperfect conception of the diagnosis and danger to mother and child from placenta previa and no acquaintance with our greatly improved methods of managing such cases, with no knowledge of the real pathology of convulsions or of the treatment by which the fatality of this fearful complication has been reduced at least seventy-five per cent., with only a general, crude notion of the puerperal phlegmasiæ, and quite unconscious of the existence and still more of the special symptoms of such puerperal affections as thrombosis, embolism, pyemia, and septicemia, we can only compare him, trite as the comparison is, with the mariner tossed on the open sea, without chart or compass.

The most condensed review of the new literature, the progress of science, and the improvements in practice in Gynecology during the past century, is not possible within the limit of time permissible on this occasion. It could only be a catalogue of authors, more numerous than that of all writers on these subjects, whose names have come down to us from previous generations; an illustrative record of how new discoveries in general pathology had illuminated the special pathology of this department of medicine; an outline picture of the fertility of invention in instruments to aid in diagnosis and to secure results from operations that were never before possible; a meagre history of how new methods of physical exploration had determined the exact character, limits, and relations of diseases before known, and had revealed many which previously had never been described or understood; and a bare reference to the ingenuity and genius which has devised the many operations for restoring those lesions of parturition which rendered life a burden to the sufferer and to those connected with her, and to the wise, scientific audacity which had established as justifiable conservative surgery, those bold operations which,

within two decades, have added at least fifty thousand years to the life of women.

In the inauguration of a National Society, whose avowed purpose is the promotion of science in all that relates to Obstetrics and the Diseases of Women, I am sure that it would be offensive to the good taste of its founders, for me to allude to what they have individually achieved already in this direction. Those who are really successful in making positive contributions to science or art may well be content with the decision of posterity as to the value of their work. Contemporaneous judgment is often partial or prejudiced. Individual, sectional, and even national bias, may obscure the perception and thus exaggerate or depreciate the importance of those things which subsequent generations will estimate at their true worth. Science is cosmopolitan; and in this age, the intercourse between the educated of different nationalities is becoming so much more intimate, and an acquaintance with the literature of different languages is becoming so much more general, that all intellectual and scientific progress must be more or less reciprocal; neither theory or practice can long continue in a groove; members of our profession, in all its departments, must become broader and more eclectic, not blind followers of local or national supposed authorities; and such phrases as the Irish, the English, or the Continental "School of Obstetrics," or the "American School of Gynecologists," must inevitably soon become obsolete.

Individual or national pride may well be encouraged so far as it stimulates earnest effort. We have a right to cherish the memory and honor the names of Bard, Stearns, McDowell, Dewees, Meigs, Hodge, Miller, and Channing, as our illustrious dead, who have won an acknowledged position in our department of science; but for those who are now living, the judgment of the future is not yet definitely determined. No man can safely rest upon his past achievements. Unfortunately, men who have justly earned a high position, have in some instances, either from lack of moral sense, or wise discretion, or sound judgment, fallen and lost

the respect and the confidence of their peers, and consequently have failed to retain the reputation which their ability and merit would otherwise have secured.

In conclusion, let me express the hope that this Society, both as individuals and as an organized body, may command the approval of the highest and most cultivated judgment of the scientific world, and not incur the reproach which Job in his bitterness uttered, "Ye are all physicians of no value."